

**PERSONAL DATA****APPLICANT:**

FULL NAME \_\_\_\_\_  
SOCIAL SECURITY # \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
MOBILE PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

**CO-APPLICANT:**

FULL NAME \_\_\_\_\_  
SOCIAL SECURITY # \_\_\_\_\_  
STREET ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
MOBILE PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

ARE YOU MOVING FROM PUBLIC OR SUBSIDIZED HOUSING? ☐ YES ☐ NO

**ADDRESS OF PROPERTY YOU ARE PURCHASING**

DATE OF HOMEBUYER EDUCATION LOCATION OF HOMEBUYER EDUCATION

(ATTACH CERTIFICATE)

**HOUSEHOLD DATA (EVERYONE THAT WILL BE LIVING IN THE HOUSEHOLD NOT LISTED ABOVE)**

NAME	DATE OF BIRTH	SOCIAL SEC #	FULL TIME STUDENT?	DOES THIS PERSON HAVE ANY SOURCE OF INCOME?
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

**TOTAL NUMBER OF PEOPLE LIVING IN THE HOUSEHOLD:**

**HOMEBUYING TEAM**

	NAME	COMPANY	TELEPHONE	EMAIL
LENDER				
REALTOR				
ATTORNEY				



**INCOME DATA** (COMPLETE FOR ALL ADULTS AND ALL MEMBERS OF THE HOUSEHOLD WHO HAVE ANY SOURCE OF INCOME)

APPLICANT:

EMPLOYER:

I GET PAID: ☐ WEEKLY ☐ EVERY TWO WEEKS ☐ MONTHLY AVERAGE AMOUNT: \$ \_\_\_\_\_

I WORK OVERTIME ON A CONSISTENT BASIS: ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE BONUSES / COMMISSION ON A CONSISTENT BASIS: ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE SSI / SOC. SEC. BENEFITS FOR MYSELF OR DEPENDANT(S): ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE CHILD SUPPORT / ALIMONY: ☐ YES ☐ NO \$ \_\_\_\_\_

OTHER INCOME: ☐ YES ☐ NO \$ \_\_\_\_\_

I AM A FULL TIME STUDENT ☐ YES ☐ NO

I AM DISABLED ☐ YES ☐ NO

CO-APPLICANT:

EMPLOYER:

I GET PAID: ☐ WEEKLY ☐ EVERY TWO WEEKS ☐ MONTHLY AVERAGE AMOUNT: \$ \_\_\_\_\_

I WORK OVERTIME ON A CONSISTENT BASIS: ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE BONUSES / COMMISSION ON A CONSISTENT BASIS: ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE SSI / SOC. SEC. BENEFITS FOR MYSELF OR DEPENDANT(S): ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE CHILD SUPPORT / ALIMONY: ☐ YES ☐ NO \$ \_\_\_\_\_

OTHER INCOME: ☐ YES ☐ NO \$ \_\_\_\_\_

I AM A FULL TIME STUDENT ☐ YES ☐ NO

I AM DISABLED ☐ YES ☐ NO

OTHER:

EMPLOYER:

I GET PAID: ☐ WEEKLY ☐ EVERY TWO WEEKS ☐ MONTHLY AVERAGE AMOUNT: \$ \_\_\_\_\_

I WORK OVERTIME ON A CONSISTENT BASIS: ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE BONUSES / COMMISSION ON A CONSISTENT BASIS: ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE SSI / SOC. SEC. BENEFITS FOR MYSELF OR DEPENDANT(S): ☐ YES ☐ NO \$ \_\_\_\_\_

I RECEIVE CHILD SUPPORT / ALIMONY: ☐ YES ☐ NO \$ \_\_\_\_\_

OTHER INCOME: ☐ YES ☐ NO \$ \_\_\_\_\_

I AM A FULL TIME STUDENT ☐ YES ☐ NO

I AM DISABLED ☐ YES ☐ NO

*IF THERE ARE MORE MEMBERS WITH INCOME, PLEASE PRINT AN EXTRA PAGE 2 AND ATTACH TO DOCUMENT.*





**ASSETS: PLEASE DETAIL ALL HOUSEHOLD MEMBERS' ASSETS**

	Description	Name of Owner	Value
Checking Account 1			
Checking Account 2			
Savings Account 1			
Savings Account 2			
Certificate of Deposits			
Retirement Accounts			
Real Estate			
Collectables			
Other			
Other			
Other			

**RACE (FOR REPORTING PURPOSES, CHECK ALL THAT APPLY)**

☐ WHITE ☐ BLACK/AFRICAN-AMERICAN ☐ AMERICAN INDIAN ☐ ASIAN ☐ NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER  
☐ ALASKAN NATIVE ☐ AMERICAN INDIAN/ALASKAN NATIVE ☐ ASIAN & WHITE ☐ BLACK/AFRICAN AMERICAN & WHITE  
☐ AMERICAN INDIAN/ALASKAN NATIVE & BLACK/AFRICAN AMER.

**ETHNICITY (CHECK ONLY ONE)**

☐ HISPANIC ☐ NON-HISPANIC

**ALL INDIVIDUALS WHO WILL BE OWNERS MUST BE NAMED AS BUYERS ON THIS APPLICATION AND MUST SIGN BELOW.**

***I/WE ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF. I/WE HEREBY GRANT PERMISSION TO THE CITY OF CHICOPEE TO OBTAIN ANY FURTHER INFORMATION NECESSARY TO DETERMINE MY/OUR ELIGIBILITY FOR THE CHICOPEE HOMEBUYER ASSISTANCE PROGRAM. THIS INFORMATION MAY BE OBTAINED FROM ANY SOURCE NAMED IN THIS APPLICATION. SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY.***

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature(s) of Applicants

\_\_\_\_\_  
Date



## CHECKLIST

*As an essential part of this application, ALL adult household members must submit relevant documentation regarding all income and assets. APPLICATIONS WITHOUT ALL ACCOMPANYING DOCUMENTATION MAY NOT BE PROCESSED. The following documents must be submitted with your completed application:*

- ☐ Fully executed Purchase & Sale Agreement
- ☐ Previous three years signed Tax Returns
- ☐ Most recent 10 consecutive stubs from each income source (employment, pension)
- ☐ Copy of annual income from Social Security, Court Ordered Alimony, Child Support
- ☐ Copy of most recent past 3 months of consecutive statements (most recent) for each: bank books, checking account, bank statements, retirement account statements
- ☐ Homebuyer Graduation Certificate
- ☐ Signed Lead Notice (Property Transfer Notice)
- ☐ Copy of Real Estate Deposit Check

*Prior to closing, the following:*

- ☐ Good Faith Estimate | Cost of Loan
- ☐ First mortgage 1003 application
- ☐ Lender Underwriting Analysis
- ☐ Housing Quality Inspection
- ☐ First mortgage commitment
- ☐ First mortgage 1003 application
- ☐ Property Appraisal
- ☐ Draft HUD Settlement Statement

**PLEASE BE AWARE THAT THE CITY REQUIRES 20 BUSINESS DAYS FROM APPROVAL TO LOAN CLOSING. PLEASE PLAN ACCORDINGLY.**